PTO/S8/06 (12-04)
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as collection of information unless it displays a valid OMB control number.

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 Effective December 8, 2004										^7/	Application or Rocked Humber 10/025.778		
APPLICATION AS FILED - (Column 1)				.ED - F	PART I (Column 2)			SMALL ENTITY		OR	OTHER THAN SMALL ENTITY		
FOR		NUMBER FILED		b	NUMBER EXTRA		_	RATE (1)	FEE (S)		RATE (\$)	FEE (S)	
BASIC FEE (37 CFR 1.16(a), (b), or (c))		·	N/A			N/A		N/A	150.00	.1	. N/A	300.00	
SEARCH FEE (37 CFR 1 16(N, (N, or (m))			· N/A		N/A.		7	· N/A	\$250	1	NIA	\$500	
EXAMINATION FEE (37 CFR 1.18(4), (5), or (4))			NA .		1 N/A		1	NA	\$100	1	NA	\$200	
TOTAL CLAIMS OF CFR 1.18(1)		,	minus 20 *		•		1	X\$ 25 .		OR	X\$50 .		
INDEPENDENT CLAIMS (37 OFR 1.16(h))		minus 3 *			•		1	X100 .		1	X200 .		
APPLICATION (FEE (37 CFR 1.16(s))	If the specification and sheets of paper, the apples \$250 (\$125 for small additional 50 sheets or 35 U.S.C. 41(a)(1)(G) a			plication size fee due enlity) for each traction thereof. See							·		
MULTIPLE DEPENDENT CLAIM PRESENT (37 OFR 1.16(1))]	+180=		j	+360=		
"If the difference in column 1 is less than zero, enter "O" in column 2.							TOTAL]	TOTAL			
APPLICATION AS AMENDED - PART II													
(Column 1) (Column 2) (Column 3).						_	SMALL ENTITY			OR OTHER THAN SMALL ENTITY			
\$ 6.150	RE	XLAIMS MAINING NPTER ENDMENT		NUI PREVI	HEST WBER KOUSLY OFOR	PRESENT. EXTRA		RATE (\$)	ADOI- TIONAL FEE (\$)		RATE (S)	ADDI- TIONAL FEE (\$)	
Total	, i	12	Minus	2	2	•	1	X\$ 25 .		OR	X\$50· _		
Total provide tage of the pendent of	8	6	Minus.	-2	5	10		X100 _		OR	X200 _	9200	
Application Size Fee (37 CFR 1.16(s))													
FIRST PRESENTATION OF MULTIPLE DEPENDENT CL				ENT CLAI	M (37 CF	R 1.16(I)	ŀ	+180=		OR	+360=		
1/3/07								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	Pd.	
1/2/0		lumn 1)			umn 2) ÆST	(Column 3)	1 1	· · ·		1	·		
Total	REA	MAINING FTER NOMENT		NUM PREVI	BER OUSLY FOR	PRESENT EXTRA		RATE (5)	ADDI- TIONAL FEE (5)		RATE (5)	ADDI- TIONAL FEE (\$)	
S CO. CAM FIRST		21	Miraus.	G	1	-		X\$ 25 .	7	OR	X\$50 · .	. ,	
Lindependent CAT CFR 1.180		5	Minus	***	6	*/		X100 "	7	OR 1	X200 .	/	
Application Size Fee (37 CFR 1.16(s))											·		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (17 CFR 1.16(1))						.	+180=	/	OR	+360a	./		
1,11,15,19,25 TOTAL ADDITEE									T	OR :	TOTAL ADD'L FEE		
" If the "High	* If the entry in column 1 is less than the entry in column 2, write "O" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box In column 1.												

This collection of Information is required by 37 CFR 1.16. The Information is required to obtain to retain a benefit by the public which is to like (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Three will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner f r Patients, P.O. B x 1460, Alexandria, VA 22313-1460.